

UNITED STATES BANKRUPTCY COURT
DISTRICT OF IDAHO (TWIN FALLS)

Name of Debtor
Vladimir Paniouchkine
Tatyana Paniouchkine

Case Number
99-41879

-13



99-41879

Name of Creditor (The person or other entity to whom the debtor owes money or property):

Jay D Sudweeks

Name and Address where notices should be sent:

Jay D Sudweeks
POB 1846
Twin Falls, ID 83301

- ☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- ☒ Check box if you have never received any notices from the bankruptcy court in this case.
- ☐ Check box if the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

Telephone Number:

Account or other number by which creditor identifies debtor:

Check here if ☐ replaces this claim ☐ amends a previously filed claim, dated _____
1. Basis for Claim

- ☐ Goods sold
- ☒ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☐ Taxes
- ☐ Other _____

- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries, and compensation (fill out below)
- Your SS #: 529 48 0563
- Unpaid compensation for services performed from 4-29-99 to _____ (date) (date)

2. Date debt was incurred:

4-29-99

3. If court judgment, date obtained:**4. Total Amount of Claim at Time Case Filed:**\$ 425.00

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

- ☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

5. Secured Claim.

- ☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐ Real Estate ☐ Motor Vehicle
- ☐ Other _____

Value of Collateral: \$ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____

6. Unsecured Priority Claim.

- ☐ Check this box if you have an unsecured priority claim
- Amount entitled to priority \$ _____
- Specify the priority of the claim:
- ☒ Wages, salaries, or commissions (up to \$4,300)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
- ☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
- ☐ Up to \$ 1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
- ☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).
- ☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- ☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____).

*Amounts are subject to adjustment on 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

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Date

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

12-20-99

Duane Ross O & S Trucking

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

Chapter 12 and 13 claims, along with any supporting must be filed in duplicate.

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VIVAT LOGISTICS

PO BOX 515
TWIN FALLS, ID 83401-0515
PHONE 208-733-7560 FAX 208-733-7561

CARRIER _____
CONTACT DUNNEN

DATE 4-29-99

FAX# 435-896-6726

PICK UP INFO PO# _____ PU# _____

COMMODITY Fusion Machine

SHIPPER SEATTACH

CONSIGNEE Big Country
FAIRFIELD ID

DRIVER _____ UNIT# _____

PAY # _____ RATE 42500 STOP PAY _____

TARPS _____ WEIGHT SLIPS _____ PALLETS _____

SPECIAL
NOTES

THE piece of PIPE IS AT CENTERVILLE
PICK UP POINT

PLEASE SIGN AND STAMP BACKS _____ DATE _____

THANK YOU
RUDY HELTON

VIVAT Logistics, Inc

409 Shoshone St.
Twin Falls, ID 83301

Load Order

DATE	P.O. NO.
4/28/99	4062

Carrier

D & S
P.O.Box 695
300 W 600 N
Richfield, UT 84701

DUE DATE

4/28/99

SHIP VIA

FB

P.O. #

RUHE4029

ITEM	DESCRIPTION	Pick Up / Delivery	RATE	Weight	AMOUNT
Load			425.00	48000	425.00
			Total		
			\$425.00		

INVOICE

INVOICE NO.

335955

SOLD TO <i>D.S. Trucking Inc</i>		SHIPPED TO <i>High Country Fusion Company LLC</i>	
STREET & NO. <i>P.O. Box 695</i>		STREET & NO. <i>P.O. Box 509</i>	
CITY <i>Richfield, Utah</i>	STATE <i>Utah</i>	ZIP <i>84701</i>	CITY <i>Fairfield, Idaho</i>
		STATE <i>Idaho</i>	ZIP <i>83327</i>

CUSTOMER'S ORDER	SALESMAN	TERMS	F.O.B.	DATE
<p><i>Picked up two machines, one in Denver Colo. & one in Centerville Utah along with a piece of plastic pipe & delivered them to Fairfield Idaho.</i></p> <p style="text-align: right;"><i>425.-00</i></p> <p><i>Vitaf Logistics</i></p>				